

Cambridgeshire County Council



ANNUAL REPORT

OF THE

Medical Officer of Health

FOR THE

Administrative County of Cambridge

for the Year 1945

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VITAL STATISTICS AND INCIDENCE OF INFECTIOUS DISEASE

The following figures set out the principal facts relating to the vital statistics of the Administrative County for the year 1945 and for the two previous years for comparison.

Populations (Registrar-General's Estimates) :

	1943	1944	1945
Administrative County ..	154,310	152,860	150,200
Cambridge	78,210	77,660	76,260
Rural Districts	76,100	75,200	73,940
Chesterton	34,140	33,600	33,240
Newmarket	19,470	19,330	18,800
South Cambridgeshire	22,490	22,270	21,900

Births :

Administrative County ..	Number ..	2,575	2,968	2,680
	Rate per 1,000	16.7	19.4	17.8
Cambridge	Number ..	1,369	1,536	1,337
	Rate per 1,000	17.5	19.8	17.5
Rural Districts	Number ..	1,206	1,432	1,343
	Rate per 1,000	15.8	19.0	18.2
Chesterton	Number ..	540	652	606
	Rate per 1,000	15.8	19.4	18.2
Newmarket	Number ..	285	358	323
	Rate per 1,000	14.6	18.5	17.2
South Cambridgeshire ..	Number ..	381	422	414
	Rate per 1,000	16.9	18.9	18.9

Illegitimate Births :

Administrative County ..	Number	202	294	348
	Rate per cent. live births	7.8	9.9	13.0
Cambridge	Number	120	178	190
	Rate per cent. live births	8.8	11.6	14.2
Rural Districts	Number	82	116	158
	Rate per cent. live births	6.8	8.1	11.8

Still Births :

Administrative County ..	Number	87	58	68
	Rate per 1,000 total births	32.6	19.2	24.7
Cambridge	Number	42	30	34
	Rate per 1,000 total births	29.8	19.2	24.8
Rural Districts	Number	45	28	34
	Rate per 1,000 total births	36.0	19.2	24.7

Deaths :

Administrative County..	..	Number	1,809	1,954	1,872
		Rate ..	11.7	12.8	12.5
Cambridge .. ..	..	Number	938	965	887
		Rate ..	12.0	12.4	11.6
Rural Districts .. ..	..	Number	871	989	985
		Rate ..	11.4	13.2	13.3

Infant Deaths :

Administrative County..	..	Number	84	136	129
		Rate ..	32.6	45.8	48.1
Cambridge .. ..	..	Number	53	83	65
		Rate ..	38.7	54.0	48.6
Rural Districts .. ..	..	Number	31	53	64
		Rate ..	25.7	37.0	47.7

*Maternal Deaths :**(a) From sepsis :*

Administrative County..	..	Number	Nil	1	Nil
		Rate per 1,000 total births	Nil	0.3	Nil
Cambridge .. ..	..	Number	Nil	1	Nil
		Rate per 1,000 total births	Nil	0.6	Nil
Rural Districts .. ..	..	Number	Nil	Nil	Nil
		Rate per 1,000 total births	Nil	Nil	Nil

(b) From other puerperal conditions :

Administrative County..	..	Number	3	5	1
		Rate per 1,000 total births	1.1	1.7	0.36
Cambridge .. ..	..	Number	3	1	Nil
		Rate per 1,000 total births	2.1	0.6	Nil
Rural Districts .. ..	..	Number	Nil	4	1
		Rate per 1,000 total births	Nil	2.7	0.7

*Tuberculosis deaths :**(a) Pulmonary :*

Administrative County..	..	Number	74	61	52
		Rate ..	0.48	0.40	0.35
Cambridge .. ..	..	Number	42	40	28
		Rate ..	0.54	0.52	0.37
Rural Districts .. ..	..	Number	32	21	24
		Rate ..	0.42	0.27	0.32

(b) Non-pulmonary :

Administrative County..	..	Number	5	15	12
		Rate ..	0.03	0.10	0.08
Cambridge .. ..	..	Number	5	6	6
		Rate ..	0.06	0.08	0.08
Rural Districts .. ..	..	Number	Nil	9	6
		Rate ..	Nil	0.12	0.08

(c) All forms :

Administrative County..	..	Number	79	75	64
		Rate ..	0.51	0.50	0.43
Cambridge .. ..	..	Number	47	46	34
		Rate ..	0.60	0.60	0.45
Rural Districts .. ..	..	Number	32	30	30
		Rate ..	0.42	0.39	0.40

Cancer Deaths :

Administrative County..	..	Number	310	273	301
		Rate ..	2.0	1.8	2.0
Cambridge ..	..	Number	152	134	145
		Rate ..	1.9	1.7	1.9
Rural Districts ..	..	Number	158	139	156
		Rate ..	2.1	1.8	2.1

Again the Registrar-General has estimated that the population of the administrative county has fallen, the average rate of fall since 1942 having been about 2000 a year.

The rise in the birth rate noted in 1944 was not wholly maintained in 1945, though the rate in the county as a whole remained somewhat higher than that of 1943, a fact which was entirely due to a higher rate in the rural area.

The rise in the illegitimacy rate has continued unchecked and in 1945 it was approximately three times the figure for 1938. Reasons have been given in previous reports for the opinion that the rise in the rate may not indicate an increase in irregular unions, and it now remains to be seen whether a return to conditions more like those obtaining before the outbreak of war will bring about a fall in the illegitimacy rate to its pre-war level.

The still birth rate has risen somewhat from the very low figure of the previous year, but the figure is still low compared with those of pre-war years and it cannot be said at present that the rise is not fortuitous.

Infant mortality in the county as a whole has risen somewhat, though there has been a fall in the Borough of Cambridge from the rather high figure of the previous year. This of course means that there has been a rise in the rural area and actually the figures for the two parts of the county in 1945 were at substantially the same level. The figure for the county as a whole was 46, but it is not entirely ground for satisfaction that the Cambridgeshire figure was not substantially above that, since one would expect an area of its characteristics to have a low infant mortality rate. A very satisfactory feature is the fall in the number of deaths from diarrhoea in Cambridge from the rather high figure of 19 in the previous year to 4 in 1945, but in the rural area there has been a slight rise (from 5 to 7). There was a considerable rise in the number of deaths from premature birth in the rural area and a slight rise in Cambridge, the number of such deaths being 20 in each case, but on the other hand there has been a fall in the number of deaths caused by congenital malformations and birth injury in both areas, particularly marked in the Borough. Deaths from respiratory disease were not a large feature in either area and no doubt the rise in the general figure in the rural districts was due chiefly to the rise in the number of deaths from prematurity.

By contrast there has been a marked fall in maternal mortality, only one death in the whole of the area having been recorded. No deaths were ascribed to sepsis in either the Borough or the rural area.

and in the latter this makes the fourth year in succession that such a state of affairs has occurred.

The fall in the death rate from pulmonary tuberculosis recorded in 1944 has continued in 1945. On this occasion, however, the whole of the fall has taken place in Cambridge and there has been a slight rise in the rural area. As, however, the 1944 figure was a record low level in the rural area, the slight rise there need not give rise to concern. Even with the rise, the figure for the rural area was the lowest recorded except that for 1944. There has also been a fall in the death rate from non-pulmonary tuberculosis and in this case it is in the rural area that the fall has occurred, the Cambridge figure remaining stationary. As a result there has been a reduction in the death rate from all forms of tuberculosis of 0.07 in the administrative county and 0.15 in Cambridge, while a rise of 0.01 in the rural area has occurred.

The cancer death rate has reverted to its 1943 level in both Cambridge and the rural area, so that it must be assumed for the present that the fall in 1944 was not part of a real trend in that direction.

The figures showing the incidence of the principal infectious diseases (civilians only) in the County during the year, with those of the two previous years for comparison, are set out below :—

	1943	1944	1945
Scarlet Fever	206	224	128
Diphtheria	26	21	9
Enteric Fever (including paratyphoid)	3	3	3
Smallpox	—	—	—
Cerebro-spinal Fever	7	6	—
Pneumonia	82	67	41

Thus all the principal infectious diseases except enteric fever, the incidence of which is in any case very low, have declined during 1945. Cerebro-spinal fever was completely absent for the first time for several years and the figure for diphtheria reached pre-war level.

Diphtheria Immunisation.—There has been no change in the arrangements for carrying out this work during the year. Owing to concentration on the under school age group, there has been no work done in the schools and there has been a tendency for more children to be immunised through the Rural District Councils' schemes relating to individual children rather than in the infant welfare centres.

The following table shows the work of each centre in this respect :—

	<i>Children treated</i>				
Abington	17
Balsham	28
Barrington	16
Bassingbourn	25
Bottisham	6
Bourn	47

Burwell	28
Castle Camps	17
Cheveley	25
Coton	22
Cottenham	35
Croydon	9
Duxford	8
Fordham	—
Fulbourn	21
Gamlingay	13
Girton	12
Great Shelford	—
Harston	32
Histon	62
Isleham	9
Linton	20
Melbourn	14
Sawston	12
Soham	17
Steeple Morden	21
Swavesey	23
Waterbeach	—
Wicken	6
Willingham	12
Total ..	<hr/> 557 <hr/>

Under the individual schemes of the Rural District Councils, 823 children of under school age were immunised, making, with those immunised at infant welfare centres, a total of 1380 in this class as against 894 in the previous year.

MIDWIFERY, MATERNITY AND CHILD WELFARE SERVICES

In 1945, notification of intention to practise was received from 53 midwives, the total number known to be practising at the end of the year being 46.

Midwives attended 654 confinements during the year, acting as midwives only in 364 cases and as maternity nurses under medical direction in 290. They found it necessary to summon medical aid in 133 of the cases in which they acted as midwives only.

Once again the number of admissions of maternity cases to the County Hospital rose, the total being 1,326 of which 402 were normally resident in the rural area, the remainder being made up of 593 normally resident in Cambridge, and the rather large figure of 331 evacuees and emergency medical service cases. In the previous year the total number of admissions was 1,150, of which 457 were normally resident in the rural area. Presumably the slight fall in the number of cases normally resident in both Cambridge and the rural area is due to the fall in the total number of births in the County. In addition to the admissions to the County Hospital from the rural area, there were 4 admissions to the Grange Maternity Home, Ely, because of greater accessibility of that institution from their place of residence.

Eighty women from the rural area were admitted to Addenbrooke's Hospital for abnormalities connected with pregnancy and parturition, two less than in 1944.

At the end of the year there were three midwives qualified to administer analgesics in accordance with the requirements of the Central Midwives Board and in whose areas the apparatus had been provided. The removal of the special qualifications to be possessed by the volunteer who acts as assistant to the midwife in these cases has been a great help in forwarding the progress of this work. Actually at the time of writing there are eight midwives in a position to carry it out. During 1945, 70 cases were given gas and air by the 3 midwives able to administer it and reports show that the results were almost uniformly favourable.

The total number of births notified in the rural area in 1945 was 652, of which 17 were still births. The number of births notified is less than half the total number actually allocated to the rural part of the county as will be seen by reference to the statistics at the beginning of the report, but the number of instances of actual failure to notify is not large and the balance is made up of confinements in institutions, including both hospitals and nursing homes, outside the area (principally in Cambridge).

The number of women examined ante-natally under the Council's arrangements with general practitioners was 356, while the number examined post-natally was 138. The following are the details :—

Ante-natal examinations at or about the 16th week :

To be delivered by midwife	To be transferred to doctor	Referred to hospital	Consultant's opinion required	Institutional delivery recommended
194	2	3	3	2

Ante-natal examinations at 32nd—36th week :

260	—	12	4	3
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Post-natal examinations (1) :

Cases taken normal course	Treatment required (excluding dental treatment)	Treatment being obtained	Reference to hospital desirable
94	11	8	—

Post-natal examinations (2) :

61	9	3	1
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There were 7 obstetric consultations in 1945, one less than in the previous year.

Premature Infants.—The arrangements set out in the report for the year 1944 have continued during 1945, the first full year they have been in operation.

The number of premature births, defined as being those of infant with a birth weight of less than $5\frac{1}{2}$ lbs., notified in 1945, was 45. Of these 24 were born in the mother's own home or nursing homes (4) and 24 in hospital. Of the babies born at home 18 were nursed without

admission to hospital, three died within the first twenty-four hours, 15 survived longer than one month, and 6 died between the end of the first day of life and the end of the first month. Of those born in hospital, 4 died during the first twenty-four hours of life, 15 survived for more than one month and 5 died between the end of the first day of life and the end of the first month.

Illegitimate Infants.—The usual arrangements for visiting by health visitors apply to illegitimate children and it is thought that, coupled with the liaison maintained with voluntary agencies, this is sufficient to safeguard their interests.

The following figures show the visits paid by health visitors to children under the age of 5 :—

To children under 1 year	1st visits	..	1,274
	Total visits	..	11,939
To children aged 1-5	..	Total visits	15,356

No figures are available with respect to verminous conditions in children under 5, but health visitors continue to give attention to the matter as opportunity offers.

The following figures show the work carried out in relation to children boarded out for reward :.

Homes inspected	..	..	..	..	28
Approved	..	..	..	..	28
Total number supervised	..	..	..	..	130
Children on register at beginning of year					73
New cases	..	..	..	..	57
Removed from register (all causes)	..				46
Remaining on register at end of year					84
Orders of Court made under Sect. 212	..				Nil.

There were 3 cases of failure to notify reception of a child and 3 cases of failure to notify removal.

Four notifications relating to 4 separate children were made by individuals concerned under the Adoption of Children (Regulation) Act of 1939.

Infant Welfare Centres.—During the year new centres were opened at Barrington, Castle Camps, Croydon, Duxford, Gamlingay and Isleham, making the total number in operation at the end of the year 30.

The number of children attending the centres during the year was 2,732, of whom 755 were still under the age of one year at the end of the year. The number of new children attending was 1,147, of whom 792 were under the age of one year at the date of their first attendance.

Registration of Nursing Homes.—The usual arrangements for registration and inspection were in operation.

One application for the registration of a small nursing home of two beds for general medical cases at Great Shelford was received and granted.

The total number of registered nursing homes in the administrative county at the end of the year was 14, containing 50 maternity beds and 36 others.

TUBERCULOSIS

The following figures relate to new cases of tuberculosis coming to the notice of the Medical Officer of Health, by formal notification or otherwise, during 1945 :—

<i>Age Periods</i>	<i>Pulmonary</i>		<i>Non-pulmonary</i>	
	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>
0	—	—	—	—
1	3	3	—	1
5	1	—	2	2
10	1	2	1	1
15	11	11	2	—
20	11	14	—	2
25	12	13	2	3
35	9	5	—	1
45	9	5	—	2
55	7	2	1	—
65 and upwards	3	5	1	—
	67	60	9	12

In 30 of these cases information was derived from sources other than formal notification, namely from the death returns of local registrars 26, posthumous notifications 2, and found on leaving the area 2. The figure relating to cases found from the death returns of registrars remains at a very high level as compared with pre-war figures and it can only be hoped that a return to peace-time conditions of medical practice will bring about improvement. Seven of the notified cases are known to have been previously notified in other areas.

The number of cases of pulmonary tuberculosis notified was 9 more than that of 1944 and therefore the decline which had been in progress since 1941 has clearly suffered a set back. In contrast to the position at the end of 1944, the whole of the increase was due to a rise in the number of female cases, there having been an actual decrease of 2 in the number of male cases. Most of the increase in the number of female cases seems to have taken place at the extremes of life as there were 3 more cases at ages 1 to 5 and 5 more at ages over 65.

Fortunately the picture relating to non-pulmonary cases is a little brighter as there were 4 fewer male cases and 8 fewer female cases.

Thus there has been an actual decrease of 3 in the total number of cases of tuberculosis notified, the figure for 1945 being 10 less than that for 1940 and 55 less than that for 1941, but still 36 higher than that for 1939 and 12 higher than that for 1938.

Dispensary and Homes.—Nurse Hall resigned her appointment as Tuberculosis Nurse during 1945, and it was decided to make some alterations in the conditions of appointment of her successor and in the method of carrying out the home visiting of cases of tuberculosis. It

was felt that the latter could quite well be handed over to the District Nursing Associations of the Borough and the County who were already arranging for their nurses to carry out the greater part of it on the County Council's behalf. In the place of a tuberculosis nurse with the qualifications and experience required by the regulations therefore a state registered nurse was appointed as clinic nurse only, to give assistance with the work of the clinic but not to carry out any home visiting. Unfortunately the nurse appointed had to relinquish the work on account of ill-health very shortly after taking up her duties and in spite of all reasonable efforts it was not possible to secure the services of another state registered nurse. A woman with considerable nursing experience, who had previously given assistance at times with the work of the clinic, was therefore appointed in a temporary capacity, and has continued to carry out the necessary duties satisfactorily since then.

The following figures set out the work carried out :—

1. Cases examined at or in connection with the Clinic :—

	<i>Borough</i>	<i>Rural</i>	<i>Total</i>
New cases	934	535	1,469
Old cases	400	350	750
	1,334	885	2,219

2. Visits by patients to Clinic :—

Insured Persons	2,006	857	2,863
School Children	364	312	676
Other Uninsured Persons	1,070	640	1,710
	3,440	1,809	5,249

3. Visits to Homes :—

(a) *By Tuberculosis Officer :—*

Insured Persons	263	155	418
School Children	69	80	149
Other Uninsured Persons ..	146	92	238
Total 1945	478	327	805
„ 1944	470	359	829

(b) *By Clinic Nurse :—*

Insured Persons	103	60	163
Uninsured Persons	61	39	100
Total 1945	164	99	263
„ 1944	282	270	552

(c) *By General Nursing Staff :—*

Insured Persons	427	443	870
Uninsured Persons	158	448	606
Total 1945	585	891	1,476
„ 1944	381	801	1,182

In 1945 the total number of new cases examined was 1,469, as against 1,648 in 1944, of which 170 were found to be suffering from tuberculosis (210 in 1944). Of the 170 new tuberculous cases, 32 were transfers from other areas. Of the total number of new cases, 168 were contacts of whom 5 proved to be infected.

At the end of the year 862 names remained on the register, 275 having at some time or other had tubercle bacilli in the sputum. The number remaining on the register was 76 more than the corresponding number at the end of 1944.

The number of specimens of sputum examined was 234, tubercle bacilli being found in 81.

X-ray examinations numbered 7,894 (6,488 in 1944) of which 6,064 were cases in which films were taken and 1,830 required screen examination only.

Ninety-four cases received artificial pneumothorax treatment throughout the year (69 in 1944), the total number of refills being 1,983 (1,223 in 1944).

Three new cases received dental treatment at the Clinie, five less than in 1944.

Again the number of new cases has fallen somewhat, but the total number of visits to the Clinie has risen by nearly 500. The Tuberculosis Officer's visits to patients remained at approximately the same level as in the previous year, but the Clinie Nurse's visits show a considerable reduction. This is due to the alteration in the arrangements mentioned earlier and the figure given relates of course only to visits carried out in the early part of the year before the alteration had taken place. The visits by the general nursing staff, i.e. the district nurses, show a corresponding increase.

The number of cases receiving artificial pneumothorax treatment and the consequent number of attendances for the purpose continue to rise and it should be realised that the time consuming nature of this work is very imperfectly shown by the figures. Each extra attendance means a very considerable extra expenditure of time. No doubt some of the increase in the work is dictated by the difficulty of obtaining sanatorium accommodation in cases where it is really desirable, and it is fortunate that this alternative method of controlling the disease and its spread can be put into operation at the Clinie.

X-ray examinations have again increased markedly in number.

Care and After Care.—The Cambridgeshire Tuberculosis After Care Association made its usual valuable contribution towards the work of controlling tuberculosis during 1945, and the County Council showed its recognition of this fact by increasing its grant from the annual level of £250 to £350. A record number of patients was assisted, namely 9 men and 34 women.

The arrangements under the terms of Memo 266/T of the Ministry of Health have now become a routine method of giving assistance in appropriate cases. The number of new applications in 1945 was 32 as against 21 in 1944. Of the 32 cases, only 5 received

sanatorium treatment and 27 approved domiciliary treatment. A few of the latter had recently been discharged from sanatorium and many of them attended the Clinic for artificial pneumothorax treatment. The amount expended in the provision of these grants is of course refunded in full by the Exchequer. It was necessary in several cases to ask the Minister of Health to approve continuance of the grant beyond the length of time for which the County Council has discretion to pay and in no case was approval withheld.

Sanatorium Accommodation.—Unfortunately no diminution in the difficulty of obtaining sanatorium beds has occurred in 1945 and there has been a waiting list throughout the year. The following are the details of admissions and discharges:—

	<i>In Sanatoria</i> <i>Jan. 1st, 1945</i>	<i>Admitted</i> <i>during 1945</i>	<i>Total</i> <i>treated 1945</i>
Adult males ..	39	32	71
Adult females ..	30	34	64
Children ..	9	8	17
	78	74	152

The 74 new admissions constitute one less than the number in the previous year (1944, 75; 1943, 89; 1942, 93; 1941, 79).

MENTAL DEFICIENCY ACTS

In 1945, 18 new cases were considered by the Mental Deficiency Committee, 6 notified by the County Education Committee, 4 by the Borough Committee for Education, 5 privately, 1 by the Police, 1 by the Secretary of State and 1 by the Cambridgeshire Voluntary Association for Mental Welfare.

The method of dealing with them was:—

Petition for Certified Institution	..	2
Statutory Supervision	10	
Voluntary Supervision	4	
Order of Secretary of State	1	
No action	1	

At the end of the year there were 27 cases on leave of absence from institutions.

In one of the cases in which a petition was presented the London County Council accepted responsibility for maintenance and admitted the defective to one of their institutions, so that only two vacancies were obtained for cases for which the Cambridgeshire County Council was responsible during 1945, and one of these was in a Public Assistance Institution, though it is true that the case concerned was transferred to the Royal Eastern Counties Institution after the end of the year.

The difficulty of obtaining vacancies can hardly be overstressed, particularly where low grade cases are concerned. There were fifteen urgent low grade cases on the Council's waiting list at the end of 1945 in spite of the fact that two cases where the position was extreme had been certified as persons of unsound mind, and admitted to the County Mental Hospital, a very undesirable procedure only justified by overwhelming stress of circumstances.

VENEREAL DISEASES

The following figures include all the cases coming to the Clinic at Addenbrooke's Hospital during 1945 from all the areas served by it and include both civil and military cases :—

	<i>Male</i>	<i>Female</i>	<i>Total</i>
Under treatment on January 1st, 1945	48	50	98
Old cases re-admitted	7	8	15
" First-time " patients during 1945 ..	183	186	369
Total under treatment (including transfers from other clinics)	268	251	519
Left without completing treatment ..	11	14	25
Completed treatment but not final tests	23	10	33
Transferred to other Treatment Centres	35	13	48
Under treatment at end of year ..	56	53	109
Out-patient attendances :			
(a) On Clinic days	1,266	1,416	2,682
(b) On intermediate days	1,479	65	1,544
Aggregate " In-patient days " ..	62	230	292

There has been a fall in the number of new cases of 92 as compared with the figure for the previous year, and the fall is evenly distributed between the two sexes. It may be remembered that 1944 was the first year in which the number of new female patients had equalled the number of new male patients, but that position has continued in 1945 (actually there were three more female patients as compared with male patients). The number of new service cases was 42 of which the surprisingly large number of 35 were found to be suffering from non-venereal conditions.

Altogether (service and civilian patients) there were 280 patients who were found not to be suffering from a venereal condition, a number only ten less than that of the previous year and 17 less than that of 1943 when it was by far the highest on record. In contrast to the figures for the previous year, however, the number of women found not to be suffering from a venereal disease was not substantially greater than the number of men in a like position. This does not necessarily mean that the large number of such cases in both sexes is not due to contact tracing as was suggested in the previous year, but it does make it more probable that it is due to a disposition to seek treatment where the possibility of infection is suspected.

When considering Cambridgeshire cases only, it is found that there were 228 new patients compared with 217 in the previous year, com-

prising 45 cases of syphilis (17 more than in 1944), 20 cases of gonorrhoea (4 less than in 1944) and 163 non-venereal conditions (2 less than in 1944). The generally somewhat brighter picture set out in the figures for all areas is therefore considerably less bright for Cambridgeshire only. So high a figure for the number of new cases of syphilis has not been recorded for a great many years and, although it appears to be offset by a reduction in the number of cases of gonorrhoea, reasons have been given in former reports against optimistic deductions from that figure. Actually the Cambridgeshire figures give some ground for the conjecture that the smaller number of new patients from all areas may not be caused so much by a fall in the incidence of venereal disease as by the provision of more facilities for treatment in the outlying areas which the Clinic has previously served. It is not possible to state the relative proportions of the two sexes suffering from syphilis and gonorrhoea in Cambridgeshire patients only, but returning to the figures for the whole area served by the Clinic it appears that out of a total of 50 cases of syphilis, 26 were women, and out of a total of 39 cases of gonorrhoea 13 were women. It would therefore seem that the old position under which it was felt that women were avoiding treatment may be passing away. Even now the proportion in the case of gonorrhoea is not entirely satisfactory, but, when it is remembered that only three new cases of women suffering from gonorrhoea attended the Clinic from the whole area in 1944, the improvement is apparent.

Laboratory Diagnosis.—The number of specimens submitted for Wasserman reaction in 1945 was 1,802 (586 from the Clinic). The number examined bacteriologically was 760 (607 from the Clinic).

Follow-up and Contact Tracing.—The number of notifications of contacts received under the arrangements set up by Regulation 33B fell off considerably in 1945, only 28 being received as against 65 in 1944. In no case could a notification be identified as applying to the same contact from two or more sources, so that the question of formal proceedings under Regulation 33B did not arise. In only 16 of the cases were the particulars given sufficient to enable an attempt to get in touch with the contact to be made, and in only 8 of the cases was the attempt successful, a somewhat disappointing result as compared with that of the previous year. Once again in those cases where an interview was carried out no resentment of the approach was in evidence.

BLIND PERSONS ACTS

At the end of the year there were 251 blind persons on the register, the distribution as to situation and age periods being as follows :—

	0-5	5-16	Over 16	Total
Borough ..	3	1	118	122
Rural Area ..	—	1	128	129
	3	2	246	251

Of the 251 cases of blindness, 216 were regarded as unemployable. There were 8 homeworkers and 18 employed elsewhere, besides one employed in a workshop for the blind. There were no blind persons under training though two were regarded as trainable. One trained blind person was unemployed.

R. FRENCH,
County Medical Officer.

